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PATENT  
S.N. 10/019,323  
0796/66435

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants : Vjatcheslav Tretiakov et al.  
Serial No. : 10/019,323  
Filing Date : June 7, 2002  
For: : DIGITAL X-RAY SCANNING APPARATUS  
Group : 2882  
Examiner : Allen C. Ho  
Confirmation No.: 6256

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COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

S I R:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.

\_\_\_\_\_ A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

\_\_\_\_\_ No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE FEE				
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	11	-	* 20	=	*** 0	x	9	18	=	\$0	\$0
Indepen- dent Claims	7	-	** 7	=	*** 4	x	44	88	=	\$0	\$0
Multiple Dependent Claims Presented _____ Yes _____ <u>X</u> No For First Time:							150	300	=	\$0	\$0
							TOTAL ADDITIONAL FEE			\$0	\$0

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Amendment Transmittal Letter  
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- \*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.  
\*\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.  
\*\*\*If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

"The HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims as originally filed.

\_\_\_\_\_ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$\_\_\_\_.  
Three copies of this sheet are enclosed.

  X   Applicant hereby petitions for a three- month extension. Our check in the amount of \_\_\_\_\_ is enclosed.

  X   The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Two copies of this sheet are enclosed.

  X   Any additional fees under 37 C.F.R. §1.16 for the presentation of extra claims.

  X   Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,



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